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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

Bruce V. Hartley et al.

Application No.:

09/834,334

Group No.:

2857

Filed:

12 April 2001

Examiner:

Craig S. Miller

FOR:

METHOD AND APPARATUS FOR ASSESSING THE SECURITY OF

A COMPUTER SYSTEM

ATTN: FEE AMENDMENT Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

CERTIFICATE OF MAILING

Date of Deposit: 01 March 2004

I hereby state that the following attached papers

- 1. Transmittal Form SB-21 (1 page);
- 2. Fee Transmittal, in duplicate, authorizing charges to Deposit Account (2 pages);
- 3. Petition for 1 Mo. Extension, in duplicate, authorizing charges to Deposit Account (2 pages);
- 4. Response to Office Action mailed 11/5/2003 (18 pages);
- 5. Appendix A, including cover sheet (54 pages);
- 6. Certificate of Mailing (1 page), and
- 7. Return Postcard (1)

are being deposited with the United States Postal Service as First Class Mail under 37 CFR 1.8, on the date indicated above and with sufficient postage, in an envelope addressed to: Attn: Fee Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Linda Levin

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PTO/SB/21 (08-03)

Approved for use through 07/31/2006. OMB 0651-0031

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TRANSMITTAL **FORM**

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission 78

Application Number	09/834,334
Filing Date	12 April 2001
First Named Inventor	Bruce V. Hartley et al.
Art Unit	2857
Examiner Name	Craig S. Miller
Attorney Docket Number	405836

		 					
		ENCLOSURES	(check all that apply)				
Fee Transmittal Form		Drawing(s)		After Allowance Communication to Group			
Fee Attached		Licensing-relate	d Papers	Appeal Communication to Board of Appeals and Interferences			
Amendment / Reply		Petition		Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)			
After Final		Petition to Conv Provisional App		Proprietary Information			
Affidavits/declaration(s)		Power of Attorne Change of Corre	ey, Revocation espondence Address	Status Letter			
⊠ Extension of Time Request		☐ Terminal Disclaimer		Other Enclosure(s) (please identify below):			
Express Abandonment Request		Request for Refund		Appendix A (54 pages); Certificate of Mailing, and			
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Information Disclosure S	Statement						
Certified Copy of Priority Document(s)		Remarks					
Response to Missing Pa	arts/						
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Parts under 37 CFF							
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Date	3/1/04						
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I hereby certify that this con Service with sufficient post Alexandria, VA 22313-1450	tage as first o	class m <i>ail)</i> in an env	nsmitted to the USPTO elope addressed to: C	or deposited with the United States Postal commissioner for Patents, P.O. Box 1450,			
Typed or printed name	Linda Levin	11					
Signature	de	A Om		Date 3/1/04			

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FEE TRANSMITTAL

for FY 2004

Filing Date

First Named Inventor

Examiner Name

Complete if Known

Application Number

09/834,334

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First Named Inventor

Examiner Name

Craig S. Miller

Art Unit

2857

Attorney Docket No.

Application Number

09/834,334

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APPLICATION

APPL

TOTAL AMOUNT OF PAYMENT (\$) 55				Attor	Attorney Docket No. 403636						
METHOD OF PAYMENT (check all that apply)					FEE CALCULATION (continued)						
			3. A	3. ADDITIONAL FEES							
☐ Check ☐ Credit card ☐ Money ☐ Other ☐ None Order ☐ Deposit Account:			l								
			Large	Entity	Small E	ntity					
Est Deposit recount.			Fee	Fee	Fee	Fee	Fee De	scription	Fee Paid		
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Account 12-0600 Number		1052	50	2052	25	•	provisional filing fee				
			1.552		2002		or cover sheet.				
Deposit Account Lathrop & Gage L.C.			1053	130	1053	130	Non-English spe	cification			
			1812	2,520	1812	2,520	For filing a reque	est for reexamination			
Name The Director is authorized to: (check all that apply)				1804	920*	1804	920*	Requesting publ Examiner action			
☐ Charge fee(s) indicated below ☐ Credit any overpayments ☐ Charge any additional fee(s) during the pendency of this application			1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action				
☐ Charge fee(s) indicated below, except for the filing fee			1251	110	2251	55		ply within first month	55		
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1. BASIC F	ILING FEE			1253	950	2253	475	Extension for reply within third month			
Large Entity	Small Entity			1254	1,480	2254	740	Extension for remonth	•		
	Fee Fee Code (\$)	Fee Description	Fee Pald	1255	2,010	2255	1,005		oly within fifth month		
	Code (\$) 2001 385	Utility filing fee	Fee Faid	1401	330	2401	165	Notice of Appea	•		
	2001 303	Design filing fee		1402	330	2402	165	• • • • • • • • • • • • • • • • • • • •	support of an appeal		
	2003 265	Plant filing fee		1403	290	2403	145	Request for oral	hearing		
1004 770 2	2004 385	Reissue filing fee		1451	1,510	1451	1,510	Petition to institu	rte a public use		
1005 160 2	2005 80	Provisional filling fee	L	1452	110	2452	55	Petition to revive	e – unavoidable		
	SUBTOTA	AL (1)	(\$) 0	1453	1,330	2453	665	Petition to revive – unintentional			
			1,1,2	1501	1,330	2501	665	Utility issue fee (
2. EXTRA CLA	IM FEES FO	OR UTILITY AND RE		1502	480	2502	240	Design issue fee	•		
		Extra Fee from Claims below	n Fee Paid	1503	640	2503	320	Plant issue fee			
Total Claims	-20 ** =	0 x	= 0	1460	130	1460	130	Petitions to the (
Independent		1807	50	1807	50	Processing fee under 37 CFR 1.17 (q)		' 			
Claims	-3** =	0 X	= 0	1806	180	1806	180	Submission of Ir Stmt	formation Disclosure		
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Fee Fee Code (\$)		 66 Fee Description		1809	770	2809	385		ion after final rejection		
1202 18	2202 9	Claims in excess of		1810	770	2810	385		nal invention to be		
1201 86 1203 290	2201 4:	3 Independent claim 45 Multiple dependen									
		** Reissue indene	•	,,,,,	770	2801	385	Request for Contin	ued Examination (RCE)		
1204 86	2204 43	original patent		1802	900	1802	900	Request for exped of a design application			
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SUBTOTAL (2) (\$) 0				*Red	*Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) 55						
**or number previously paid, if greater, For Reissues, see above					,						
SUBMITTED BY								Com	plete (if applicable)		
Name (Print/Type)	Curtis A	. Vock	Registration No. (Attorney/Agent)		38.	356		Telephone	(720) 931-3011		
Signature					11.53	1 013		Date			
Signature		I SI ADE N' I	INIA				- 1	Date	3/1/04		

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